OMB NO: 0970-0154 EXPIRATION DATE: 12/31/00

ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT

State: Californ Co./City/Dist. of: Date of Order/No Court/Case Num	otice:				Original Order/Notice Amended Order/Notice Terminate Order/Notice
Employer/Withholder's Federal EIN Number:			RE:	RE: Employee/Obligor's Name (Last, First, MI):	
Employer/Withholder's Name:				* Employee/Obligor's Social Security Number:	
Employer/Withholder's Address:				* Employee/Obligor's Case Identifier:	
				* Custodial Parent's Name (La	ast, First, MI):
Child(ren)'	's Name(s): DOI	3		Child(ren)'s Name(s):	DOB
If checked,	By law, you are even if the <i>Orde</i>	required to deduct theser/Notice is not issued b	se amounts by your Stat	d Support based upon an order from the above-named employee. te. by health insurance coverage a	oyee's/obligor's income until
\$ \$ \$ \$ for a total of \$	per per per per per per	in current sup in past-due so in medical su in other (spec in other (spec to be forward	upport pport cify): cify):	Arrears 12 weeks or grea	ater? yes no
You do not have	to vary your pay cycle to be at cycle, use the following to	e in compliance with the	e support o	rder. If your pay cycle does no	t match the ordered
\$	per weekly pay period. per biweekly pay period (every two weeks).				ay period (twice a month). riod.
Order/Notice. S defray the cost withheld amour earnings. For th When remitting p	n withholding no later than end payment within7	working days of the ne laws governing the not exceed% on on withholding, the ate/date of withholding at	pay date/dework state f the emploide following and the case;	working days after the late of withholding. You are see of the employee for the all byee's/obligor's aggregate of information is needed (see a late identifier	entitled to deduct a fee to owable amount. The total isposable weekly #9 on back).
Make it payable Send check to:	_; Bank account number: * to:		·		
Authorized by:	Judicial Officer	Other (specify):			WEST GROUP
Print Name:					Official Publisher

OMB NO: 0970-0154 EXPIRATION DATE: 12/31/00

ADDITIONAL INFORMATION TO EMPLOYERS AND OTHER WITHHOLDERS

Χ

If checked you are required to provide a copy of this form to your employee, along with a blank *Request for Hearing Regarding Wage and Earnings Assignment* (form 1299.28) within 10 days.

- 1. **Priority:** Withholding under this *Order/Notice* has priority over any other legal process under State law against the same income. Federal tax levies in effect before receipt of this order have priority. If there are Federal tax levies in effect please contact the requesting agency listed below.
- 2. **Combining Payments:** You can combine withheld amounts from more than one employee/obligor's income in a single payment to each agency requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.
- 3. **Reporting the Paydate/Date of Withholding:** You must report the paydate/date of withholding when sending the payment. The paydate/date of withholding is the date on which amount was withheld from the employee's wages. You must comply with the law of the state of employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding order and forward the child support payments.
- 4. **Employee/Obligor with Multiple Support Withholdings:** If there is more than one *Order/Notice to Withhold Income for Child Support* against this employee/obligor and you are unable to honor all support Order/Notices due to Federal or State withholding limits, you must follow the law of the state of employee's/obligor's principal place of employment. You must honor all *Order/Notices* to the greatest extent possible. (see #9 below)
- 5. **Termination Notification:** You must promptly notify the payee when the employee/obligor is no longer working for you. Please provide the information requested and return a copy of this order/notice to the agency identified below.

EMPLOYEE'S/OBLIGOR'S NAME:

EMPLOYEE'S CASE IDENTIFIER: DATE OF SEPARATION:

LAST KNOWN HOME ADDRESS:

NEW EMPLOYER'S ADDRESS:

Notice to Employee: Upon termination you are also required to provide this information to the agency identified below.

- 6. Lump Sum Payments: You may be required to report and withhold from lump sum payments such as bonuses, commissions, or severance pay. If you have any questions about lump sum payments, contact the person or authority below.
- 7. **Liability:** If you fail to withhold income as the *Order/Notice* directs, you are liable for both the accumulated amount you should have withheld from the employee/obligor's income and any other penalties set by State law, including being cited for contempt of court. You may, however deduct \$1 from the Obligor's earnings for each payment that you make.
- 8. **Anti-discrimination:** You are subject to a fine determined under State law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against any employee/obligor because of a child support withholding.
- 9.* Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 U.S.C. § 1673(b)); or 2) the amounts allowed by the State of the employee's/obligor's principal place of employment. The Federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: State, Federal, local taxes; Social Security taxes; and Medicare taxes; along with disability insurance and payments to public employees' retirement systems. After the Obligor's disposable earnings are known, withhold the amount required by the Order/Notice, but never withhold more than 50 percent of the disposable earnings unless the court order specifies a higher percentage. Federal law prohibits withholding more than 65 percent of disposable earning of an employee in any case.
- 10. **To the Employee/Obligor:** If you did not receive a blank *Request for Hearing Regarding Wage and Earnings Assignment* (form 1299.28), you may get one from the court clerk, the local child support agency, or the family law facilitator.
- 11. **Earnings for purposes of this Order/Notice include:** 1) wages, salary, bonuses, vacation pay, retirement pay, and commissions paid by an employer; 2) payments for services of independent contractors; 3) dividends, interest, rents, royalties, and residuals; 4) patent rights, and mineral or other natural resource rights; 5) any payments due as a result of written or oral contracts for services or sales, regardless of title; 6) payments due for workers' compensation temporary benefits, or payments from a disability or health insurance policy or program; and 7) any other payments or credits due regardless of source.
- 12. Other:

*NOTE: If you or your agent are served with a copy of this order in the state that issued the order, you are to follow the law of the state that issued this order with respect to these items.

Requesting Agency:

WEST GROUP Official Publisher